

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number

421/60/21/2

First Named Inventor

David W. Boykin

COMPLETE IF KNOWN

Application Number

10/721,525

Filing Date

November 25, 2003

Art Unit

Examiner Name



I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DICATIONIC 2,5-DIARYLFURAN AZA-ANALOGS AS ANTI-PROTOZOAN AGENTS

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

November 25, 2003

as United States Application Number or PCT International

Application Number

10/721,525

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <u>25297</u> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>David W.</u>		Family Name or Surname <u>Boykin</u>	
Inventor's Signature <u>David W. Boykin</u>		Date <u>12/3/03</u>	
Residence: City <u>Atlanta</u>	State <u>GA</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>1369 Springdale Road, NE</u>			
City <u>Atlanta</u>	State <u>GA</u>	ZIP <u>30306</u>	Country <u>US</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>Richard R.</u>		Family Name or Surname <u>Tidwell</u>	
Inventor's Signature		Date	
Residence: City <u>Pittsboro</u>	State <u>NC</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>390 W.R. Clark Road</u>			
City <u>Pittsboro</u>	State <u>NC</u>	ZIP <u>27312</u>	Country <u>US</u>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 2]

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number: <u>25297</u>		OR <input type="checkbox"/> Correspondence address below	
Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>David W.</u>		Family Name or Surname <u>Boykin</u>	
Inventor's Signature			Date
Residence: City <u>Atlanta</u>	State <u>GA</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>1369 Springdale Road, NE</u>			
City <u>Atlanta</u>	State <u>GA</u>	ZIP <u>30306</u>	Country <u>US</u>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>Richard R.</u>		Family Name or Surname <u>Tidwell</u>	
Inventor's Signature <u>Richard R. Tidwell</u>			Date <u>12/5/03</u>
Residence: City <u>Pittsboro</u>	State <u>NC</u>	Country <u>US</u>	Citizenship <u>US</u>
Mailing Address <u>390 W.R. Clark Road</u>			
City <u>Pittsboro</u>	State <u>NC</u>	ZIP <u>27312</u>	Country <u>US</u>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 2]

PTO/SB/02A (05-03)

Approved for use through 04/30/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mohamed A.		Ismail	
Inventor's Signature <i>Mohamed A. Ismail</i>		Date	
Residence: City	Mansoura	State	Country Egypt
Citizenship EG			
Mailing Address Mansoura University			
Mailing Address Faculty of Science, Chemistry Department			
City	Mansoura	State	Zip 30
		Country Egypt	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Reto		Brun	
Inventor's Signature		Date	
Residence: City	Basel	State	Country CH
Citizenship CH			
Mailing Address			
Mailing Address			
City	Basel	State	Zip
		Country CH	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Citizenship			
Mailing Address			
Mailing Address			
City		State	Zip
		Country	

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet

Page 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mohamed A.		Ismail	
Inventor's Signature		Date	
Residence: City Atlanta		State GA	Country US
Citizenship BG			
Mailing Address Georgia State University			
Mailing Address University Plaza			
City Atlanta		State GA	Zip 30303
Country US			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Reto		Brun	
Inventor's Signature <i>[Signature]</i>		Date 17/12/2003	
Residence: City Basel		State	Country CH
Citizenship CH			
Mailing Address			
Mailing Address			
City Basel		State	Zip
Country CH			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Citizenship			
Mailing Address			
Mailing Address			
City		State	Zip
Country			

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.03. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, Mohamed A. Ismail, residing at Metzonkor, Talkha, Dakhllia, Egypt to protect my interests do hereby make, constitute, and appoint David W. Boykin, who resides at 1369 Springdale Road, N.E, Atlanta, Georgia, 30306 as my true and lawful attorney in fact for me, and in my name, place and stead, giving and granting unto said attorney in fact full and complete power and authority to do generally and perform all and every act or acts whatsoever needful and necessary to be done for me, and in my name, to do execute, and perform as largely and amply to all intents and purposes as I, myself, could do if I were personally present, and by these presents I hereby ratify and confirm all that said attorney, in fact shall do by virtue hereof, for the purposes of executing any documents or licenses or granting any authorizations or to complete any other document relating to any patentable activities undertaken by me while working with, or at, Georgia State University in Atlanta, Georgia, USA.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 11th day of

Aug., 2003.

EGYPT
CITY OF CAIRO
EMBASSY OF THE UNITED
STATES OF AMERICA

Mohamed A. Ismail (Seal)

Mohamed A. Ismail

Cecelia K. El Khatib
Witness of Notary Public

Cecelia K. El Khatib
Vice Consul
Embassy of the
United States of America